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Evolution of Occupational Therapy Practice: Life History of

Yvonne Randall, EdD, MHA, OTR/L, FAOTA.

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Abstract

Objective: This qualitative life history study was completed through a semi-structured interview with Dr. Yvonne Randall. This paper reflects a piece of a larger study gathering information and insights about occupational therapy throughout history and how it has evolved. The purpose of the study is to provide current and future generations of occupational therapists a view of the history and how occupational therapy practice has evolved from its inception to current practice through the life history stories of occupational therapists who have held leadership roles at the national level and beyond. It is anticipated that the life history process will be a powerful way to gather this information.

Method: A detailed, semi-structured interview was conducted at the University of North Dakota School of Medicine and Health Sciences. The interview was transcribed verbatim and analyzed for codes, categories, themes, and a final assertion.

Results: Data analysis examined and coded the information gained from the interview. The codes that emerged from the interview were further grouped into categories and then themes. This information led to a final assertion that reflects the information from the interview.

Conclusion: Dr. Randall's values and passion in her personal and professional life have guided her commitment to advocating for clients and the profession of occupational therapy.

Introduction

This life history is one of 30 life history interviews which are part of a larger project, *Histories of Individuals Who Have Been Influential in Developing Occupational Therapy (OT) at the National Level and Beyond*. The purpose of the study is to provide current and future generations of occupational therapists a view of the history and how occupational therapy

practice has evolved from its inception to current practice through the life history stories of occupational therapists who have held leadership roles at the national level and beyond. It is anticipated that the life history process will be a powerful way to gather this information.

The researchers of this study examined the life of Dr. Yvonne Randall using the life history approach which focuses on Dr. Randall's involvement in the evolution of occupational therapy at the national level. Dr. Randall is active in the occupational therapy profession, as she has served numerous positions in the American Occupational Therapy Association (AOTA). Dr. Randall is currently a chairperson with the American Occupational Therapy Political Action Committee (AOTPAC), as well as working on her current project of creating a personalized dementia care unit.

The life history interview was conducted via zoom a videoconferencing software. The researchers were located at the University of North Dakota School of Medicine and Health Sciences and Dr. Randall was located at her place of residence. The interview took place on Tuesday, October 22nd, 2019, at 4:15 pm.

Literature Review

Prior to the conduction of the interview, a literature review on relevant history was completed. In 1986, the AOTA Representative Assembly adopted a motion to create an autonomous certification board (AOTCB) (Reed & Peters, 2010). In this time frame, the OT labor force was under-represented and maldistributed across the United States. This led to the recruitment of students from diverse backgrounds (Reed & Peters, 2010). This is relevant to the history of Dr. Randall as she was entering the occupational therapy practice setting around this time. Another relevant event that impacted Dr. Randall in her practice was in 1996 when the

AOTCB became the National Board for Certification in Occupational Therapy (NBCOT); thus OT practitioners were no longer required to belong to AOTA (Reed & Peters, 2010). This has had a big impact on Dr. Randall in her leadership in OTPAC and her continued advocacy for being a member of AOTA. Also, in 1996 an argument was raised pertaining to the use of exclusively occupation-based intervention rather than the use of non-occupation-based activities and tasks (Reed & Peters, 2010). This impacts how interventions can be completed and switch the focus to be more client-centered. These occupational therapy historical events impacted Dr. Randall through her profession as a therapist and as a leader for occupational therapy.

Theory

The questions on the interview schedule, as well as the coding process, were guided by the Kawa model. According to Teah and Iwama (2015), the Kawa model is a metaphor that addresses an individual's life journey with regards to the one's environment, context, obstacles and challenges, influencing factors, and opportunities to enhance one's life flow. The Kawa model was the foundation for the interview that was conducted with Dr. Randall, as questions were added to the interview schedule to allow the researchers to gain an understanding of the impact that barriers had on her life, as well as the way in which she overcame her obstacles to allow her life to enhance its flow (Teah & Iwama, 2015).

Description of Participant

Information about Dr. Randall was gathered from her curriculum vitae and through direct interview with the participant. Dr. Yvonne Randall received her bachelor's degree in 1987 from Texas Women's University and she continued her education to get her Master's degree in healthcare education at Chapman University in 1994. Soon after, she perused her next goal to

receive her Doctorate in health care education in 2006 from the University of Nevada. Dr. Randall has filled many roles throughout her practice and participation in the occupational therapy profession. Dr. Randall describes her accomplishments as becoming an associate dean on the Nevada campus in 2018-2019, which her role is to facilitate the Association of College Educators (ACUE) training for 20 faculty.

Additionally, she described that she has pride in the accomplishments of her positions as the associate's dean, interim associate's dean, and occupational therapy director. Currently, Dr. Randall is a chairperson with the American Occupational Therapy Political Action Committee (AOTPAC). Additionally, she currently spends her time on her new passion for creating a personalized dementia care unit and continuing the thoughts of occupational therapy in having meaningful and client-centered occupations for the residents. Dr. Randall is passionate about occupational therapy and helps inspire that passion in others using her robust personality and diverse communication skills.

Methodology

The researchers utilized a semi-structured interview, as well as an interview schedule that was prepared by the project directors for study. The questions on the interview schedule were implemented into the interview with the intent to allow the participant to reflect on her experiences throughout their career in occupational therapy. The researchers added questions to modify the interview schedule with the purpose to implement the Kawa model with the purpose to emphasize the flow of her life (Teah & Iwama, 2015).

Study Design

The study design follows a life history approach to provide an understanding of participant experiences with regards to occupational therapy, as well as their perceptions of the evolution of the profession. The research directors implemented purposeful sampling to obtain participants that fit the research question. This approach is a qualitative research design; therefore, the study was focused on Dr. Randall's involvement in the evolution of occupational therapy practice.

Participant Selection

The participant was selected from a participant list compiled through purposive sampling by the project directors. Informed consent was obtained prior to the interview and the project was reviewed by the UND Institutional Review Board and because of the study design, the formal IRB process was waived.

A detailed, semi-structured interview was conducted at the UND School of Medicine and Health Sciences building. The interview took approximately 90 minutes to complete, followed by transcription and data analysis to organize the information. The student researchers were given permission to modify or add interview questions as needed for each specific interview.

The research directors utilized purposeful sampling to determine participants that would best answer the research question, as well as met the criteria appropriately. Initial contact was made, and informed consent was obtained from the participants by the research directors. Once the participants confirmed their participation, further contact was made by the researchers via email and telephone to determine an interview date and time.

Data Collection

Data were collected through a semi-structured interview, at which a video recording was made of the virtual interview from a researcher's laptop. An audio recording of the interview was also obtained via a researcher's cellular telephone. The researchers prepared for the interview by completing research to gain a better understanding of Dr. Randall's experiences prior to conversing with her. The interview lasted approximately 90 minutes. The following week, the researchers transcribed the interview verbatim from the audio and video recordings.

Trustworthiness

The researchers established the trustworthiness of their data, as they sent their transcription to Dr. Randall for member checking. Further trustworthiness was established, as researchers prepared reflexive journals throughout the course of the study to identify bias. This also allowed the researchers to develop an audit trail with the intent to increase reliability and validity. The researchers also compared the data to Dr. Randall's curriculum vitae (CV) following the interview. The researchers also met with research directors regularly to ensure reliability and validity.

Data Analysis

The researchers transcribed the interview verbatim by utilizing the audio and video recordings of the interview. The interview transcription was reviewed by the researchers and research directors multiple times prior to the development of codes. After codes were developed, the researchers reviewed the transcriptions and discarded codes that were not emphasized by Dr. Randall. The researchers included 15 codes (Appendix A). From the abundance of codes, three categories and themes were identified (Appendix A). The categories and themes lead to a developed overarching assertion (Appendix A). The Kawa model guided this study, including the

development of questions that emphasized the flow of Dr. Randall's life events in occupational therapy (Teah & Iwama, 2015). The Kawa model guided the questions to address turning points and barriers Dr. Randall had faced during her career (Teah & Iwama, 2015). The coding process was further guided by the Kawa model, as Dr. Randall's life events were analyzed with regards to her life events and the way in which she interacts with her environment (Teah & Iwama, 2015).

Findings/Results

Utilizing both the theory of the Kawa Model and the timeline review, the data was analyzed coded to develop three categories: Personality, Values, and Experiences.

Category 1: Personality

The theme that emerged from the category of personality described that Dr. Randall's use of humor enhances her ability to work with individuals of all backgrounds. She spoke of the importance of cultural competency when working with specific populations and how her personality and approach to that population was impacted. Dr. Randall shares about her time working on a reservation in a nursing home.

“When I first started working there, I was in that deficit model of, and I have to fix. And I have to make sure that, oh, we have a splint to fix this hand that is affected because of the stroke and I have to make sure that I'm giving the adapted spoon so the person can then feed themselves and at all. And when I was, I mean, I'm sure it was not a pleasant experience, but I did learn quite a bit from it. Um in that nursing home, the people who resided there were the elders of their community and the people who were working, you know, how were we always say you don't call people in a nursing home, Grandma and

Grandpa. And you go by their name and you know, it's respect. But on the reservation, the respect is those are their grandmas and grandpas. And it is respectful for them to care for them, as an elder. And so here I was trying to impose a different culture and they were pushing back with me. And so here I was the, you know, the white girl from the city coming in, and I and even though I had grown up, where I was a minority, where Navajo was the primary. It, it was a different way of engaging... And I needed to learn how to be respectful of the culture. And I don't think we talked so much in school about culture. We do now... As well um to realize that I didn't know it all and that sometimes you just need to let people be tender and let them care for them and let them let the CNA feed grandma because grandma has lived a life and she doesn't have to feed herself.”

Dr. Randall’s passion for occupational therapy grew through her professional experiences. She has filled many positions with different qualifications and requirements, but overall stays true to filling the role of the occupational therapist. She stated,

“No matter what I have done in the 35 years of being an OT, I'm always saying I'm always an occupational therapist first. It is what oozes out of my pores and, and I hope that both of you will feel that same way that you know, the passion of what you're going to be going into this career. There's lots of things you could have done for a job, you know, and there's jobs where you could have made more money, but this is there's a calling to becoming an occupational therapist, you're going to have to explain what you do the rest of your life...so you better really love what you're going to be doing.”

Category 2: Values

Dr. Randall's strong values have guided her personal and professional life. This is represented through the value she places on those in the occupational therapy assistant positions. She also speaks about the importance of following the educational standards with those in the OTA profession

“OTA, it's when I tell a lot of our occupational therapy assistants is that is a profession unto itself. Okay, so we have a profession of occupational therapy, and we have a profession for Occupational Therapy, assisting both of them under the umbrella of occupational therapy. And that occupational therapy assistants should never feel that their career path is to become an occupational therapist. Because that's not what it was ever intended to be. And especially now with the education standards with ACOTE standards. Um, you actually have to have an Occupational Therapy Assistant on faculty. And so you do yeah. And if you with if you don't, and it can't be someone who's licensed in and still practicing as an OTA. So if someone has gone back to school and become an OT, if they're not maintaining that OTA license, as well, then they're not meeting that checkmark for an OTA.”

Dr. Randall believes advocacy is an important part of client-centered practice. The AOTA Centennial Vision addresses the importance of advocacy to ensure that the profession is value-driven and evidenced-based (AOTA, 2017). Dr. Randall continually supported advocacy throughout the interview, stating that her values were the foundation of her practice.

She discussed how her leadership has worked as a foothold for supporting advocacy stating, “I moved into the political action committee. So I moved into PAC, and now you get a letter from me every other month and maybe you open it and maybe you know, but now my big thing is advocacy for the profession.”

Category 3: Experiences

Dr. Randall's commitment to leadership is evidenced through her participation in many local and national groups. She stated how she has spent a multitude of her time moving up through the ranks of leadership starting as a secretary note taker and now as a leader of AOTPAC. When speaking about the importance of leadership vs. legislation Dr. Randall shares

“So, from where I am now. Hmm, I would say it's kind of, because of my role with PAC, of course, legislation is definitely one of the top legislation and leadership. I'm not sure which one would be um first or second, because I think maybe professionally, leadership would be first and then very close after that would be legislation. Because even as a prof-uh from being chair of PAC, but also from just a profession, if we're written out of legislation, we're not going to be practicing. So I think that that's really important.”

Dr. Randall's work with dementia care is meaningful in her personal and professional life. She shared how she hopes to create a dementia care unit that will be more effective and beneficial for those who have dementia. She speaks about her father and his dementia and how they

“tried the adult daycare rail route that failed miserably because, again, he is he's too high functioning. And so I know there are people who just fall through the cracks. And I know there are other families that um go through what we go through, what we've been through. Um and so just being able to help other people um you know, I've been we've been able to do that over the course of the last three years, just because of our errors in what we've done, and the things that we've done well. Yeah, so, but yeah, uh you think

you're going to go in one, one direction and then it's like, whoop, there's a wall. let's go somewhere else,”

and this is how she is processing through creating a dementia care unit that is meaningful and occupation-based.

A final assertion was reached through data analysis of the interview with Dr. Randall. Dr. Randall's values and passion in her personal and professional life have guided her commitment to advocating for clients and the profession of occupational therapy.

Discussion

Dr. Randall has made an impact on the evolution of occupational therapy. She has been dedicated to the profession, as evidenced by her involvement in leadership roles, and advocacy throughout those roles. Her personality and values empower fellow occupational therapists to advocate for the profession and to be passionate about what they do. Individuals that speak with Dr. Randall note her personality as bubbly, comical, and passionate.

The literature review gave a timeline to follow about impactful historical events throughout the time that Dr. Randall was entering and practicing in occupational therapy. She entered the profession in a time where there was an impact on the certification required for occupational therapy and the board that oversaw those requirements. She also was entering at a time when the profession was underrepresented and mix distributed through the United States.

Dr. Randall was practicing when the certification board for occupational therapy determined that membership to AOTA was no longer a requirement for certification, and then the argument for solely occupation-based interventions was raised. This impacted interventions

in practice, which Dr. Randall supported through her value of occupation-based activities in therapy.

The Kawa model was utilized to guide the overall life history with the intent to gain an understanding of Dr. Randall's flow of life with regards to the evolution of occupational therapy, as well as the barriers that she had to overcome to gain her success (Teah & Iwama, 2015). The coding process was guided by the Kawa model, as the researchers implemented the model to identify emphasized codes during the interview that addressed the aspects of the Kawa model.

The overall assertion that was determined from the study was developed from the themes, categories, and codes of the life history. The evolution of occupational therapy was addressed in the study, as themes were emphasized by Dr. Randall that are essential to the occupational therapy profession. Dr. Randall is influential to the profession as evidenced by her experiences, values, and personality that drives her success throughout the evolution of occupational therapy.

Acknowledgments

The researchers would like to give a special thank you to Dr. Randall for her time and participation in the life history study. She has allowed us to gain a better understanding of her experiences and perceptions with regard to the evolution of occupational therapy. Her contributions to the profession have significantly influenced occupational therapy.

References

- American Occupational Therapy Association (2017). Events from 2000-2009. American Occupational Therapy Association Inc. Retrieved from <http://otcentennial.org/events/2000>
- Reed, K.L. & Peters, C. (April 5, 2010). Occupational therapy values and beliefs, Part V: A time of professional identity, 1985 – 2000: is this really occupational therapy Would the real therapist please stand up? *OT Practice*, 15-18.
- Teah, J.Y. & Iwama, M.K.(2015). *The Kawa model made easy: A guide to applying the Kawa model in occupational therapy practice* (2nd ed.). Retrieved from www.kawamodel.com.

Appendix A

Evolution of Occupational Therapy Practice: Life History of Yvonne Randall, EdD, MHA, OTR/L, FAOTA.

Alycia Peacock, MOTS and Brianna Peterman, MOTS

Categories derived from codes:

Personality	Values	Experiences
Passion	Relationships	Dementia
Comical	Focus	Work Opportunities
Realistic	Occupation Based	Cultural Competency
	Advocacy	Roles
	OTA	AOTA
	Client Centered	Leadership

Themes:

Personality:

Dr. Randall's use of humor enhances her ability to work with individuals of all backgrounds.

Dr. Randall's passion for occupational therapy grew through her professional experiences.

Values:

Dr. Randall's strong values have guided her personal and professional life.

Dr. Randall believes advocacy is an important part of client-centered practice.

Experiences:

Dr. Randall's commitment to leadership is evidenced through her participation in many local and national groups.

Dr. Randall's work with dementia care is meaningful in her personal and professional life.

Assertion:

Dr. Randall's values and passion in her personal and professional life have guided her commitment to advocating for clients and the profession of occupational therapy.